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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Ohio Democratic Party 340 East Fulton Street ADDRESS (number and street) (Check if address is changed) Columbus 43215 ОН CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS sross@ohiodems.org (Check if address is changed) Optional Second E-Mail Address chris@pattonprocessing.com COMMITTEE'S WEB PAGE ADDRESS (URL) www.ohiodems.org (Check if address is changed) DATE 09 2019 C00016899 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Alberty, Fran, , , Type or Print Name of Treasurer Alberty, Fran,,, [Electronically Filed] 05 2020 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only

Local 202-694-1100

FEC Fo	rm 1 (Revised 02/2009)	Page <b>2</b>
TYPE OF C	COMMITTEE & Committee:	
(a)	This committee is a principal campaign committee. (Complete the candidate information below.	)
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Con information below.)	nplete the candidate
Name of Candidate		
Candidate Party Affiliat	Office Sought: House Senate President	State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Cor		(Demogratio
(d) <b>x</b>	This committee is a STA (National, State or subordinate) committee of the DEM	(Democratic, Republican, etc.) Party.
Political A	action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected organization is a
	Corporation Corporation w/o Capital Stock	Labor Organization
	Membership Organization Trade Association	Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.	
(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate s committee. (i.e., nonconnected committee)	egregated fund or party
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fund	draising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for t committees/organizations, at least one of which is an authorized committee of a federal candidate.	wo or more political
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate.	vo or more political
Com	umittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.		
4.		

FEC <b>Form 1</b> (Revised (	02/2009)	Page <b>3</b>
Write or Type Committee Name	•	-
Ohio Democrati	ic Party	
	Organization, Affiliated Committee, Joint Fundraising Representative, or Leaders	hip PAC Sponsor
Dollars for Democrats		
Mailing Address	430 South Capitol Street, SE	
Maining Address	Suite 300 Washington DC 20003 CITY STATE	ZIP CODE
Relationship: Connected	d Organization Affiliated Committee Joint Fundraising Representative Le	adership PAC Sponsor
Custodian of Records: Iden books and records.	ntify by name, address (phone number optional) and position of the person in pos	ssession of committee
Ross, Sara	ah,,,	
Mailing Address	340 East Fulton Street	
	Columbus OH 43215	
Title or Position	CITY STATE	ZIP CODE
Assistant Treasurer		221 - 6563
Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; and the natissistant treasurer).	me and address of
Full Name Alberty, Fra	an, , ,	
Mailing Address	340 East Fulton Street	
	Columbus OH 43215	7ID 00DE
Title or Position Treasurer	CITY STATE  Telephone number 614	ZIP CODE  221

I LO FUIII	1 (Revised 02/2009)	
Full Name of Designated Agent		
Mailing Address		
	CITY STATE ZI	IP CODE
Title or Position		
	Telephone number	
safety deposit boxe Name of Bank, De	<b>Depositories:</b> List all banks or other depositories in which the committee deposits funds, holds a es or maintains funds.  epository, etc.	
Name of Bank, De	es or maintains funds. epository, etc.  First Merchants Bank	
Name of Bank, De	es or maintains funds. epository, etc.	
Name of Bank, De	es or maintains funds. epository, etc.  First Merchants Bank  200 East Jackson Street	
Name of Bank, De	es or maintains funds. epository, etc.  First Merchants Bank	
Name of Bank, De	es or maintains funds.  epository, etc.  First Merchants Bank  200 East Jackson Street  Muncie  IN  47305	IP CODE
Name of Bank, De	es or maintains funds.  epository, etc.  First Merchants Bank  200 East Jackson Street  Muncie  IN  47305  CITY  STATE  Z	IP CODE
Name of Bank, De	es or maintains funds.  epository, etc.  First Merchants Bank  200 East Jackson Street  Muncie  IN  47305  CITY  STATE  Z	IP CODE
Name of Bank, De	es or maintains funds.  epository, etc.  First Merchants Bank  200 East Jackson Street  Muncie  CITY  STATE  Z  epository, etc.  Amalgamated Bank	IP CODE
Name of Bank, De	es or maintains funds.  epository, etc.  First Merchants Bank  200 East Jackson Street  Muncie  CITY  STATE  Z  epository, etc.  Amalgamated Bank	IP CODE
Name of Bank, De	es or maintains funds.  epository, etc.  First Merchants Bank  200 East Jackson Street  Muncie  CITY  STATE  Z  epository, etc.  Amalgamated Bank	IP CODE

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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h). <b>Joint Fundraisi</b>			
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Funda	raising Representative	e, or Leadership PAC Spon
Democratic Gras	sroots Victory Fund		
Mailing Address	430 South Capitol Street, SE		
Walling Address	Suite 300		
	Washington	ı DC ı	20003
Relationship:	CITY A	STATE A	ZIP CODE A
	6.112		
	Affiliated Committee Joint Joint by by name, address (phone number – optional)	t Fundraising Representa	Leadership PAC S
esignated Agent: Identif		t Fundraising Represent	Leadership PAC S
esignated Agent: Identif		t Fundraising Represent	Leadership PAC S
esignated Agent: Identif		t Fundraising Represent	Leadership PAC S
esignated Agent: Identif	y by name, address (phone number – optional)		
esignated Agent: Identif	by by name, address (phone number – optional)	t Fundraising Representation	Leadership PAC S
esignated Agent: Identif	by by name, address (phone number – optional)  CITY		
esignated Agent: Identification  Full Name	cy by name, address (phone number – optional)  CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identification of the Full Name    TITLE OR POSITION    anks or Other Depositor	cy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or m	cy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank,	cy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank,	cy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite affety deposit boxes or mame of Bank, epository, etc.	cy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite affety deposit boxes or mame of Bank, epository, etc.	cy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page \_\_\_\_ **of** \_\_\_\_

5(g)	or(h). <b>Joint Fundraisin</b>	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
6.	•	Organization, Affiliated Committee, Joint Fund	ndraising Representativ	e, or Leadership PAC Sponsor
	Mailing Address	430 South Capitol Street, SE		
		Suite 300		
		Washington	DC	20006
	Relationship:	CITY ▲	STATE A	ZIP CODE ▲
	Connected	d Organization Affiliated Committee	oint Fundraising Represent	ative Leadership PAC Sponsor
8.	Designated Agent: Identify  Full Name	by name, address (phone number – optional)		
	Mailing Address			
	TITLE OR POSITION	CITY A	STATE A	ZIP CODE A
	1	CITY A	STATE ▲ Telephone Number	ZIP CODE A
9.		ries: List all banks or other depositories in whiaintains funds.	Telephone Number	s funds, holds accounts, rents
9.	Banks or Other Deposito safety deposit boxes or ma	ries: List all banks or other depositories in whiaintains funds.	Telephone Number	s funds, holds accounts, rents
9.	Banks or Other Deposito safety deposit boxes or many Name of Bank, Depository, etc.	ries: List all banks or other depositories in whiaintains funds.	Telephone Number	s funds, holds accounts, rents

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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h). <b>Joint Fundraisi</b> n		FEC ID number	C
2.		FEC ID number	C
		FEC ID number	С
3.		FEC ID number	С
4.			
ame of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
Ohio Grassroots	Victory Fund		
	<sub>I</sub> 918 Pennsylvania SE		
Mailing Address			
	Washington	DC	20003
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Affiliated Committee Join  y by name, address (phone number – optional)	nt Fundraising Representa	Leadership PAC S
esignated Agent: Identif		t Fundraising Representa	Leadership PAC S
esignated Agent: Identify		t Fundraising Representa	Leadership PAC S
esignated Agent: Identif		t Fundraising Representa	Leadership PAC S
esignated Agent: Identif	y by name, address (phone number – optional)		
esignated Agent: Identif	y by name, address (phone number – optional)		
esignated Agent: Identify Full Name Mailing Address	y by name, address (phone number – optional)  CITY		
esignated Agent: Identify Full Name Mailing Address	y by name, address (phone number – optional)  CITY	STATE A	
esignated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposito	y by name, address (phone number – optional)  CITY   ries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full NameMailing Address  TITLE OR POSITION  anks or Other Deposito afety deposit boxes or mail	y by name, address (phone number – optional)  CITY   ries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor defety deposit boxes or mail	y by name, address (phone number – optional)  CITY   ries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor defety deposit boxes or mail	y by name, address (phone number – optional)  CITY   ries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposito afety deposit boxes or ma ame of Bank, epository, etc	y by name, address (phone number – optional)  CITY   ries: List all banks or other depositories in which	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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(h). <b>Joint Fundraisi</b> r	g raiticipant.		
1.		FEC ID number	С
2.		FEC ID number	С
3		FEC ID number	C
4		FEC ID number	C
lame of Any Connected BIDEN VICTORY	Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spons
Mailing Address	430 SOUTH CAPITOL STREET SE		
	WASHINGTON	DC	20003
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	d Organization Affiliated Committee Join  y by name, address (phone number – optional)	nt Fundraising Representa	Leadership PAC Sp
		nt Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		nt Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		nt Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		nt Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)	nt Fundraising Representa	Leadership PAC Sp
resignated Agent: Identification  Full Name  Mailing Address	y by name, address (phone number – optional)		
Full Name Mailing Address	y by name, address (phone number – optional)  CITY   CITY   ries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  Ganks or Other Deposite afety deposit boxes or mailing and general control of the position of Bank, depository, etc.	y by name, address (phone number – optional)  CITY   CITY   ries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A